

Please print or type. (Form designed for use on elite (12-pitch typewriter).

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No. C A X 0000 36 4 83		Manifest Document No.		2. Page 1 of		Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address PARA PLATE 15910 Shoemaker, Cerritos, CA 90701 4. Generator's Phone (213 404-3434						A. State Manifest Document Number 88615329			
5. Transporter 1 Company Name OMEGA RECOVERY SERVICES						B. State Generator's ID			
6. US EPA ID Number GAD 042 245 001						C. State Transporter's ID 110336			
7. Transporter 2 Company Name						D. Transporter's Phone 213/698-0991			
8. US EPA ID Number						E. State Transporter's ID			
9. Designated Facility Name and Site Address Omega Recovery Services 12504 E. Whittier Blvd. Whittier, CA 90602						F. Transporter's Phone			
10. US EPA ID Number GAD 042 2 45 001						G. State Facility's ID CA 0422 45 001			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)						12. Containers		13. Total Quantity	
a. Waste ORM-A NOS (Flexosolvent)						No. Type		14. Unit Wt/Vol	
NA 1693 ORM-A						0102 DM		G	
b.								State Waste No. 211	
c.								EPA/Other F002	
d.								State	
J. Additional Descriptions for Materials Listed Above						K. Handling Codes for Wastes Listed Above			
						a. 01			
15. Special Handling Instructions and Additional Information A) Recycle back to customer. Profile No. A-15618						b.			
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.									
Printed/Typed Name FRANK E. HERNANDEZ						Signature [Signature]		Month Day Year 08/01/90	
17. Transporter 1 Acknowledgement of Receipt of Materials									
Printed/Typed Name JAVIER HERNANDEZ						Signature [Signature]		Month Day Year 08/01/90	
18. Transporter 2 Acknowledgement of Receipt of Materials									
Printed/Typed Name						Signature		Month Day Year	
19. Discrepancy Indication Space									
20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.									
Printed/Typed Name N. JAY Solomon						Signature [Signature]		Month Day Year 08/01/90	

IN CASE OF AN EMERGENCY, CALL THE NATIONAL RESPONSE CENTER 1-800-424-3802. WITHIN CALIFORNIA CALL 1-800-852-7850